

Work Order ID 88598

88598

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August-02-12 1:18:27 PM

Item ID: D206-781-051 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Floor Protector (Pilot, Co-Pilot and Passenger)
Start Date: 7/24/12 Start Qty: 1.00 ***1*** Cust Item ID:
Required Date: 8/10/12 Req'd Qty: 1.00 ***1*** Customer:
Reference:

Approvals: Process Plan: MLS Date: 12/08/08 Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr	
DSI 9480	A	<i>SP</i>

100 0.00
100
DC Memo 0.00 *DAS 16 2-53 12/10/27*
Document Control Photocopy bluefile & type labels per PPP D206-781-051/ DSI 9480
CHG001

110 Pick Kit 0.00
110
Packaging Memo 0.00 *IK SP 12-9-27*
Packaging

120 QC4- 100% Inspect kits for completeness 0.00
120
QC Memo 0.00 *DAS 16 2-53 12/10/27*
Quality Control

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS			
Part No. _____		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. _____		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Page 2

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Item ID: D206-781-051 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Floor Protector (Pilot, Co-Pilot and Passenger)
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Required Date: 8/10/12 Req'd Qty: 1.00 ***1*** Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
130									
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D206-781-051/ DSI 9480								
	Location: _____								
	PPP rev: _____								
	Ship								
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

6/10/22 SP

ML5 12-10-22

MF 12-10-22

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

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Page 1

Work Order ID: 88598

Parent Item: D206-781-051

Parent Item Name: Floor Protector (Pilot, Co-Pilot and Passenger)

Start Date: 7/24/12

Required Date: 8/10/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP RevA: New issue DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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D206-781-011 *CHW*
Floor Protector (Pilot and Co-Pilot)

Manufactured No

110 Each 3.0000



1

B 84502 SL

Location

Loc Qty

Loc Code

FG010

3

84502

3

D206-781-021 *CHW*
Floor Protector (Passenger Cabin)

Manufactured No

110 Each 5.0000



1

B 89060 SL

Location

Loc Qty

Loc Code

FG040

5

85334

5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

DART SERVICE INSTRUCTION

TO AMEND INSTALLATION INSTRUCTIONS IIN-D407-781 REV. C

REF CANADIAN STC: SH08-60

FAA STC: SR02726NY

EASA STC: EASA.IM.R.S.01541

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 88598
12/08/08
M/S

THE PURPOSE OF THIS DART SERVICE INSTRUCTION (DSI), IS TO FACILITATE ORDERING OF A COMPLETE SET OF FLOOR PROTECTORS (PILOT, COPILOT AND PASSENGER CABIN) AS 1 COMBINED KIT INSTEAD OF 2 SEPERATE KITS. THIS IS ACCOMPLISHED BY ADDING THE D206-781-051 KIT TO SECTION 5.1 OF IIN-D407-781 FOR 206 A/B MODELS, THE D206-781-053 KIT TO SECTIONS 5.2 AND 5.3 OF IIN-D407-781 FOR 206 L/L1/L3/L4 MODELS AND THE D407-781-055 KIT TO SECTION 5.4 OF IIN-D407-781 FOR 407 MODELS AS SHOWN BELOW:

5.1 BELL 206 A/B

ADD:

FLOOR PROTECTOR KIT- PILOT, CO-PILOT PASSENGER CABIN

QTY -051	PART NUMBER	DESCRIPTION
X	D206-781-051	FLOOR PROTECTOR KIT- PILOT, CO-PILOT & PASSENGER CABIN
1	D206-781-011	FLOOR PROTECTOR KIT (PILOT AND CO-PILOT)
1	D206-781-021	FLOOR PROTECTOR KIT (PASSENGER CABIN)

5.2 BELL 206 L/L1

5.3 BELL 206 L3/L4

ADD:

FLOOR PROTECTOR KIT- PILOT, CO-PILOT PASSENGER CABIN

QTY -053	PART NUMBER	DESCRIPTION
X	D206-781-053	FLOOR PROTECTOR KIT- PILOT, CO-PILOT & PASSENGER CABIN
1	D206-781-011	FLOOR PROTECTOR KIT (PILOT AND CO-PILOT)
1	D206-781-023	FLOOR PROTECTOR KIT (PASSENGER CABIN)

5.4 BELL 407

ADD:

FLOOR PROTECTOR KIT- PILOT, CO-PILOT PASSENGER CABIN

QTY -055	PART NUMBER	DESCRIPTION
X	D407-781-055	FLOOR PROTECTOR KIT- PILOT, CO-PILOT & PASSENGER CABIN
1	D206-781-011	FLOOR PROTECTOR KIT (PILOT AND CO-PILOT)
1	D407-781-025	FLOOR PROTECTOR KIT (PASSENGER CABIN)

CANADA
DEPARTMENT OF TRANSPORT
AIRCRAFT CERTIFICATION
BRANCH
DAO # 01-O-01

APPROVED

BY: 
D. SHEPHERD (DE # 02)

DATE: 09.09.15

CERT. NO.: SH08-60

ISSUE NO.: 1

A	NEW ISSUE	AJS	09.09.15
REV.	DESCRIPTION	BY	DATE
DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED	A	DRAWING NO.	REV. A
MFG. APPR.	N/A	DSI 9480	SHEET 1 OF 1
APPROVED		TITLE	SCALE
DE APPR.		ADDITIONAL KITS	NTS
DATE	09.09.15	COPYRIGHT © 2009 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

REFERENCE ONLY**5.0 PARTS LIST****5.1 BELL 206 A/B**

Qty -051	Qty -011	Qty -021	Part Number	Description
X			D206-781-051	FLOOR PROTECTOR KIT (PILOT, CO-PILOT, PASSENGER CABIN)
1	X		D206-781-011	FLOOR PROTECTOR KIT (PILOT AND CO-PILOT)
1		X	D206-781-021	FLOOR PROTECTOR KIT (PASSENGER CABIN)
	1		D3874-1	FLOOR PROTECTOR, CO-PILOT
	1		D3874-2	FLOOR PROTECTOR, PILOT
		1	D3875-1	FLOOR PROTECTOR, PASSENGER
		2	D3934-041	CLIP ASSEMBLY
	4		D3800-1-100-300	LOOP STRIP
	4		D3800-3-100-300	HOOK STRIP
		2	D3800-1-100-500	LOOP STRIP
		2	D3800-3-100-500	HOOK STRIP
	2		AN4-13A	BOLT
		4	AN525-10R6	SCREW
	2		AN960JD416	WASHER
	2		NAS43DD4-20	SPACER
	1		NAS43DD4-64	SPACER

5.2 BELL 206 L/L1/L3/L4

Qty -053	Qty -011	Qty -023	Part Number	Description
X			D206-781-053	FLOOR PROTECTOR KIT (PILOT, CO-PILOT, PASSENGER CABIN)
1	X		D206-781-011	FLOOR PROTECTOR KIT (PILOT AND CO-PILOT)
1		X	D206-781-023	FLOOR PROTECTOR KIT (PASSENGER CABIN)
	1		D3874-1	FLOOR PROTECTOR, CO-PILOT
	1		D3874-2	FLOOR PROTECTOR, PILOT
		1	D3898-1	FLOOR PROTECTOR, PASSENGER
		2	D3934-041	CLIP ASSEMBLY
	4		D3800-1-100-300	LOOP STRIP
	4		D3800-3-100-300	HOOK STRIP
		2	D3800-1-100-500	LOOP STRIP
		2	D3800-3-100-500	HOOK STRIP
	2		AN4-13A	BOLT
		4	AN525-10R6	SCREW
	2		AN960JD416	WASHER
	2		NAS43DD4-20	SPACER
	1		NAS43DD4-64	SPACER